

EXHIBIT A



Date: 11/08/2005

To: Patricia LaBerge
The Hartford

Re: Case # 3849

Employee: Michael Cacoperdo

Claim #: 2691811113

Disability Type: LTD

X Initial claim ☐ Re-review ☐ Appeal

Clinical History:

The enclosed clinical information was reviewed. The patient is a 47 year old male with complaints of chronic low back pain. He underwent an L4-5 laminectomy in 2001. The most recent office visit note from his neurologist, Dr. Poole is dated 09/12/2005. The patient continued to complain of back pain. There was no report of specific strength deficits. The patient was prescribed the medications Elavil, Neurontin and Vicodin. The most recent office visit note from Dr. Poole is dated 04/23/2005. A thoracic spine MRI scan and cervical spine MRI scan performed 05/18/2005 and 06/23/2005, respectively documented significant degenerative and herniated disc disease. An upper extremity electro-diagnostic evaluation performed 06/20/2005 documented ulnar neuropathy at the elbow. There was no evidence of cervical radiculopathy. The lower extremity electrodiagnostic evaluation performed 04/27/2005 was consistent with S1 radiculopathy. More recent office visits notes are not available for review.

Documents Reviewed and Attending Provider Contact if Indicated:

<u>Document Date or ph. call, date and time</u>	<u>Type of Document or Person you spoke with:</u>	<u>Document Prepared by:</u>
11/04/2005 at 1615	Attempted to contact Dr. Poole, message left with Gail	This reviewer
11/07/2005 at 1100	Discussed case with Dr. Poole	This reviewer
11/04/2005 at 1630	Attempted to discuss case with Dr. Miceli, he did not have the medical chart available and would call back.	This reviewer

Employee name: Michael Cacoperdo
RRS # 3849



11/07/2005 at 1130	Attempted to discuss case with Dr. Miceli, left message	This reviewer
11/08/2005 at 1030	Attempted to discuss case with Dr. Miceli, left message	This reviewer
	MRI	
	Claim Notes	
	FAT	
	Office Notes	Dr. Poole, Dr. Altenburger
	Nerve Conduction Study	

Discussion with Attending Provider:

The case was discussed with Dr. Poole 11/07/2005 who indicated the patient continues to complain of neck and back pain that is poorly responsive to various narcotic pain regiments. Dr. Poole indicated that the combination of multi-level herniated disc disease, surgical spine history and radiculopathy provides the objective impairment to support total incapacity regarding total performance of routine occupational activities.

Questions and Reviewer's Response:

1. Is the opinion of Dr. Poole and Dr. Miceli that the claimant is incapable of even sedentary work reasonable and supported by medical evidence? Please support your opinion with clinical findings.

The opinion of Dr. Poole and Dr. Miceli that the claimant is incapable of even sedentary work is reasonable and supported by medical evidence. The combination of multi-level herniated disc disease, surgical spine history and radiculopathy provides the objective impairment to support total incapacity regarding to performance of routine occupational activities.

2. Based on the available medical evidence, what restrictions are reasonable? Please be specific, include duration for each, and support your opinion with clinical findings.

The combination of multi-level herniated disc disease, surgical spine history and radiculopathy provides the objective impairment to support total incapacity regarding to performance of routine occupational activities.



3. Is the claimant currently capable of performing full time work that is primarily seated in nature with the flexibility to reposition as needed and may require occasional lifting up to ten pounds?

The claimant currently is incapable of performing full time work that is primarily seated in nature with the flexibility to reposition as needed and may require occasional lifting up to ten pounds.

A. If the medical evidence supports function beyond these limitations, please specify what they are.

4. Please provide specific information regarding the claimant's capabilities and what types of activities he should be capable of performing.

He is reportedly independent with self care activities, ambulation and driving a motor vehicle. However the combination of multi-level herniated disc disease, surgical spine history and radiculopathy make it unlikely that the patient could participate even in a sedentary occupational capacity.

5. Are the Claimants complaints of pain consistent with clinical findings?

Typically, pain complaints do not necessarily correlate with clinical findings. However, the patient's objective clinical findings do support the patient's claim of limited functional capacity.

6. Is the Claimants current treatment reasonable and consistent with medical practice and research, including the chiropractic treatment three times/week?

The Claimants current treatment is reasonable and consistent with medical practice and research. Except for the chiropractic treatments that have not been of any particular functional benefit.

A. Is there any treatment available that may improve his function?

Limited clinical information was available and without the benefit of examining the patient, a specific treatment plan can not be developed.

7. What is his expected prognosis? Please be specific as possible and include milestones when his function might change.



The patient has achieved maximal medical improvement and unlikely to significantly improve.

Assessment/Rationale:

The patient is a 47 year old male with complaints of chronic low back pain. He underwent an L4-5 laminectomy in 2001. His current medications include Elavil, Neurontin and Vicodin. A thoracic spine MRI scan and cervical spine MRI scan performed 05/18/2005 and 06/23/2005, respectively documented significant degenerative and herniated disc disease. An upper extremity electro-diagnostic evaluation performed 06/20/2005 documented ulnar neuropathy at the elbow. The lower extremity electrodiagnostic evaluation performed 04/27/2005 was consistent with S1 radiculopathy. More recent office visits notes are not available for review. The case was discussed with Dr. Poole 11/07/2005 who indicated the patient continues to complain of neck and back pain that is poorly responsive to various narcotic pain regiments. Dr. Poole indicated that the combination of multi-level herniated disc disease, surgical spine history and radiculopathy provides the objective impairment to support total incapacity regarding to performance of routine occupational activities. This medical reviewer is inclined to agree. The patient's clinical findings do support the patient's claim of limited functional capacity. The patient has achieved maximal medical improvement and unlikely to significantly improve.

I attest that my completion of this review does not constitute a conflict of interest. Yes ☒ No ☐

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